

CODIFICATION REFERENCE NUMBER: M8461

DATE: June 10, 2011

**REPORTING VIOLENCE, VANDALISM, HARASSMENT, INTIMIDATION,
BULLYING, HAZING, ALCOHOL, AND OTHER DRUG ABUSE**

Any school employee who observes or has direct knowledge from a participant or victim of an act of violence or the possession or distribution of alcohol or other drugs on school grounds, and any school employee who reports a pupil for being under the influence of alcohol or other drugs, according to the requirements of N.J.S.A. 18A:40A-12 and N.J.A.C. 6A:16-4.3, shall file a report describing the incident to the school Principal, in accordance with N.J.S.A. 18A:17-46. The report shall be on a form to include all of the incident detail and offender and victim information that are reported on the Electronic Violence and Vandalism Reporting System (EVVRS). A report alleging an incident of harassment, intimidation, bullying or hazing shall be made in accordance with the provisions of N.J.S.A. 18A:37-13.1 and Policy 5512.

A. Reporting Violence, Vandalism, Alcohol or Other Drug Use

1. For each incident report of violence, vandalism, or alcohol or other drug abuse, the Principal shall:
 - a. Review the incident report for accuracy in indicating the incident type, offender information, victim information, pupil demographics, and incident location;
 - b. Forward a copy of the incident report to the Superintendent; and
 - c. Notify the Superintendent of the action taken regarding the incident.
2. The Board shall not discharge or subject to any manner of discrimination any school employee who files a report pursuant to N.J.A.C. 6A:16-5.3.
3. The majority representative of the school employees' bargaining units shall have access monthly to the number and disposition of all reported acts of school violence, vandalism, harassment, intimidation, or bullying pursuant to N.J.S.A. 18A:17-46.
 - a. Personally identifying information may be provided to the majority representative of the school employees' bargaining units only in instances

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when school administrators have reason to believe that the safety of a school staff member is at risk.

B. Reporting Requirements

1. The Superintendent shall:

a. Submit a report to the Department of Education in accordance with the provisions of N.J.S.A. 18A:17-46 of each incident of violence, vandalism and alcohol and other drug abuse in the school district utilizing the EVVRS;

(1) Prior to submission, the Superintendent shall review the report to verify that it is an accurate and final report of all incidences of violence and vandalism in all of the schools in the school district;

(2) Verify that the data entered onto the EVVRS are correct and in accordance with N.J.A.C. 6A:16-7.1(a)6; and

(3) Provide for the annual training of staff to prepare them to fulfill the reporting requirements set forth in N.J.A.C. 6A:16-5.3.

C. Hearing Requirements

The Superintendent shall report to the Board all acts of violence, vandalism, harassment, intimidation, bullying, hazing, and incidents of alcohol and other drug abuse that occurred during the previous reporting period in accordance with the provisions of N.J.S.A. 18A:17-46.

D. Knowingly Falsifying The Annual Violence and Vandalism Report Required Under N.J.S.A. 18A:17-46

1. Whenever it is alleged that a school employee has knowingly falsified the report, the Board shall make a determination regarding whether the employee committed the act.

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2. Any employee alleged to have knowingly falsified the report shall be notified in writing of such allegation and shall be entitled to a hearing before the Board.
 - a. The hearing shall take place within thirty business days of the date on which the employee is notified of the allegation;
 - b. The employee shall be entitled to be represented by a person of his or her choosing and to present witnesses on his or her behalf; and
 - c. The Board shall notify the employee of its determination in writing within five school days of the hearing.

3. Upon determination by the Board that an employee has knowingly falsified the report, it shall take one or more of the following actions:
 - a. Impose minor discipline on a tenured or non-tenured employee notwithstanding any other law to the contrary and if negotiated with the majority representative of the employees in the appropriate collective bargaining unit;
 - b. Withhold a tenured or nontenured employee's increment for predominantly disciplinary reasons, which shall be subject to the grievance procedures established pursuant to law and shall be subject to the grievance procedures of section 8 of N.J.S.A. 34:13A-29;
 - c. File tenure charges with the Secretary of the Board in writing and with a written statement of evidence under oath to support such charges;
 - d. Terminate employment for an employee:
 - (1) For tenured employees, the termination shall be in accordance with the outcome of the proceedings in D.3.c. above; or

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- (2) Impose such other disciplinary sanctions as may be authorized by law.
4. Any action taken by the Board pursuant to D.3. above shall be based on its consideration of the nature of the conduct, the circumstances under which it occurred, and the employee's prior employment record.
5. Any employee having been found responsible for the falsification of the report by the Board shall have the right to:
 - a. File a grievance under their respective bargaining agreements;
 - b. Appeal the Board's determination to the Commissioner of Education in accordance with N.J.A.C. 6A:3-1.3 through 1.17 and subsequently to the State Board of Education; or
 - c. Appeal the decision to the Superior Court of New Jersey.
6. The availability of appeal options shall be based upon the action taken by the Board.

A Board of Education shall submit and implement corrective action plans for high incidences of violence, vandalism, or alcohol or other drug abuse upon notification by the Commissioner of Education.

Report of Suspension of Students with Disabilities (Revised)
for reasons other than violence, vandalism, weapons or substance abuse
for the Electronic Violence and Vandalism Reporting System (EVVRS)¹

Use this form to report the suspension of students from their IEP placement for reasons other than violence, vandalism, weapons and substance abuse (VV-SA). To report an incident of violence, vandalism or substance abuse (e.g., fight, threat, damage to property), use the Incident Report Form. In accordance with federal requirements, **report all in-school suspensions** (that is, any removal from the classroom lasting at least one-half day) of students with disabilities **whether or not the student receives IEP services** during the in-school suspension.²

School _____

Incident Information

Incident Number: _____ The EVVRS generates the incident number upon data entry.

Location of Incident: cafeteria, classroom, corridor, other inside school, school grounds, bus, building exterior, district office, other outside, off-site program, school entrance.

Date of Incident: _____ **Time of Incident:** _____

Contact Name: _____ **Contact Phone:** _____

Brief Description of the Reason for the Suspension: _____

Offender Page Information

Student ID#: _____

Action Taken: _____ In-School Suspension _____ Out-of-School Suspension

Number of Days Suspended: _____

Program Provided Upon Disciplinary Action:

___ None ___ Assignment(s) ___ Academic Instruction (only) ___ Support Services (only)

___ Educational Program (Instruction & Support)

Location of Program/Services:

___ In-school setting ___ *In-district alternative educational program ___ Other in-district setting

___ Home (includes home instruction) ___ Out-of-district alternative educational program ___ Other out-of-district setting

* District Board of Education or Department of Education approved only

¹

Available at <http://homeroom.state.nj.us> – EVVRS.

² An in-school suspension is defined by IDEA reporting requirements as an instance in which a child is temporarily removed from his/her regular classroom(s) for disciplinary purposes but remains under the direct supervision of school personnel. Direct supervision means school personnel are physically in the same location as the student under their supervision.

Student Offender Information

First Name: _____ Last Name: _____ Gender: Male Female

Ethnicity (Check one): Hispanic: Yes No

Race (Check all that apply):

American Indian or Alaska Native Asian Black or African American

Native Hawaiian or Other Pacific Islander White

Grade of student in school: _____

Eligibility Category (Check the eligibility category of the student):

Autism Deaf-Blindness Emotional Disturbance Hearing Impairments Mental

Retardation Multiple Disabilities Orthopedic Impairments Other Health Impaired

Specific Learning Disabilities Speech-Language Impairments Traumatic Brain Injury Visual Impairments

Limited English Proficient (LEP): Yes No Section 504: Yes No

Student Victim Information (if applicable)

Victim Type: General education student Student with disabilities Student from another school Non-student School personnel Identifiable group

Student ID#: _____

First Name: _____ Last Name: _____ Gender: Male Female

Ethnicity(Check one): Hispanic: Yes No

Race (Check all that apply):

American Indian or Alaska Native Asian Black or African American

Native Hawaiian or Other Pacific Islander White

Grade of student in school: _____

If eligible for Special Education, check Eligibility Category (Omit if not classified)

Eligibility Category (Check the eligibility category of the student) Autism Deaf-Blindness

Emotional Disturbance Hearing Impairments Mental Retardation Multiple Disabilities

Orthopedic Impairments Other Health Impaired Specific Learning Disabilities Speech-

Language Impairments Traumatic Brain Injury Visual Impairments

Limited English Proficient (LEP): Yes No Section 504: Yes No

VIOLENCE, VANDALISM, AND SUBSTANCE ABUSE (VV-SA) INCIDENT REPORT FORM

..... INCIDENT INFORMATION

System-Assigned Incident Number _____
Local Incident Number (Optional) _____

INCIDENT HEADER (One incident record only for all offenders and victims)

School Name: _____

Location: _____ Cafeteria _____ Classroom _____ Corridor _____ Other inside school _____ School grounds _____ Bus _____ Building exterior _____ District office
 _____ Other outside _____ Off-site program _____ School entrance

Date of Incident: _____ **Time of Incident:** _____ _____ **Bias Incident** _____ **Gang-Related**

Police Notification: _____ None _____ Police notified, complaint filed _____ Police notified, no complaint filed

Contact Name: _____ **Contact Phone #** _____

INCIDENT DETAIL

VIOLENCE

WEAPONS *Check either Possession or Used in Offense*

- _____ Assault
- _____ Criminal Threat
- _____ Extortion
- _____ Fight
- _____ Harassment, Intimidation, Bullying, Threat
- _____ Kidnapping
- _____ Robbery
- _____ Sex Offense

- | <u>Possession</u> | <u>Used in Offense</u> |
|-------------------|---|
| _____ | _____ Handgun |
| _____ | _____ Rifle |
| _____ | _____ Air gun, Pellet Gun, BB Gun |
| _____ | _____ Imitation firearm |
| _____ | _____ Knife, Blade, Razor, Scissors, Box Cutter |
| _____ | _____ Pin, sharp pen/pencil |
| _____ | _____ Chain, club, brass knuckles |
| _____ | _____ Spray |
| _____ | _____ Other |

_____ Sale/distribution of weapon

BOMB OFFENSE

- _____ Bomb – exploded
- _____ Bomb – unexploded

VANDALISM/RELATED

SUBSTANCE OFFENSE

_____ Use confirmed _____ Possession _____ Distribution

- _____ Arson _____ Theft (>=\$10)
- _____ Bomb Threat _____ Trespassing
- _____ Burglary
- _____ Damage to Property
- _____ Fake Bomb
- _____ Fire Alarm Offense
- _____ Fireworks Offense
- _____ Cost incurred by LEA? (check)

SUBSTANCE TYPE

- _____ Alcohol
- _____ Marijuana
- _____ Amphetamines
- _____ Party drug
- _____ Cocaine/Crack
- _____ Hallucinogens
(e.g., LSD, PCP)
- _____ Narcotics (e.g., heroin, morphine)
- _____ Depressants (e.g., barbiturates, tranquilizers)
- _____ Anabolic steroids
- _____ Unauthorized prescription drugs
- _____ Unauthorized over the counter drugs
- _____ Inhalants
- _____ Drug paraphernalia

Incident Description: _____

OFFENDER (Check one):
<input type="checkbox"/> Known – Attach Offender Page(s)
<input type="checkbox"/> Unknown – Do not attach Offender Page

VV-SA, OFFENDER INFORMATION

System-Assigned Incident Number _____

OFFENDER TYPE: General education student Student with disabilities Student from another school Non-student

For students of this school only

Removal: Yes – Select action(s) taken from section A and/or B No – Select action taken from section C **STUDENT ID NUMBER:** _____

Disciplinary action(s) taken and days suspended or removed

SECTION A	Days	SECTION B	Days	SECTION C
<input type="checkbox"/> In-school suspension	<input type="checkbox"/>	<input type="checkbox"/> Unilateral removal	<input type="checkbox"/>	<input type="checkbox"/> None
<input type="checkbox"/> Out-of-school suspension	<input type="checkbox"/>	<input type="checkbox"/> Removal by ALJ for dangerousness	<input type="checkbox"/>	<input type="checkbox"/> Detention
<input type="checkbox"/> Expulsion				<input type="checkbox"/> Other

Program/Services provided upon disciplinary action: (check all that apply) None Assignment(s) Academic Instruction (only)
 Support Services (only) Educational Program (Academic Instruction and Support Services)

Location of Program/Services: (check all that apply) In-school setting *In-district alternative education program Other in-district setting
 Home (includes home instruction) *Out-of-district alternative education program Other out-of-district setting

****District Board of Education or Department of Education approved only***

Offender caused: Minor injury Major injury **Offender incurred:** Minor injury Major injury ***See definitions below.***

Minor Injury: Injury such as a cut, abrasion, burn or bruise where the individual was seen by the school nurse and received treatment, e.g., an ice pack, topical preparation, or bandaging; or the individual was referred to a medical practice or facility for observation and/or treatment, and the injury was not considered major as defined below

Major Injury: Injury which requires medical treatment and includes concussions, injured organs, fractured or broken bones, severe burns, or cuts requiring stitches. The injury could be a ***serious bodily injury*** as defined below.

For students with disabilities causing a major injury, only. Did the offender cause Serious Bodily Injury, defined as an injury which involves (A) a substantial risk of death; (B) extreme physical pain; (C) protracted and obvious disfigurement; or (D) protracted loss or impairment of the function of a bodily member, organ, or mental faculty? Yes No

STUDENT FIRST NAME: _____ **STUDENT LAST NAME:** _____

STATE (NJSMART) STUDENT ID _____ **GENDER:** Male Female

ETHNICITY: Hispanic: Yes No **RACE:** (check all that apply) American Indian or Alaskan Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White

GRADE: K 1 2 3 4 5 6 7 8 9 10 11 12

SPECIAL EDUCATION ELIGIBILITY CRITERIA

<input type="checkbox"/> Autism	<input type="checkbox"/> Hearing impairments	<input type="checkbox"/> Other health impairments	<input type="checkbox"/> Speech language impairments
<input type="checkbox"/> Deaf-blindness	<input type="checkbox"/> Multiple disabilities	<input type="checkbox"/> Orthopedic Impairments	<input type="checkbox"/> Traumatic brain injury
<input type="checkbox"/> Emotional disturbance	<input type="checkbox"/> Mental retardation	<input type="checkbox"/> Specific learning disabilities	<input type="checkbox"/> Visual impairments

LEP: Check if "Yes." **Section 504:** Check if "Yes."

Check the type of offense committed by this offender: Violence Vandalism Weapon Substance Abuse

VV-SA, VICTIM INFORMATION

System-Assigned Incident Number _____

VICTIM TYPE: General education student Student with disabilities Student from another school Non-student School personnel Identifiable group

Victim incurred: Minor injury Major injury Serious Bodily Injury **See definitions below.**

Minor Injury: Injury such as a cut, abrasion, burn or bruise where the individual was seen by the school nurse and received treatment, e.g. an ice pack, topical preparation, or bandaging; or the individual was referred to a medical practice or facility for observation and/or treatment, and the injury was not considered major as defined below

Major Injury: Injury which includes concussions, injured organs, fractured or broken bones, severe burns, or cuts requiring stitches.

Serious Bodily Injury: Indicated only if this victim incurred a major injury caused by a student with disabilities. Defined as a injury which involves (A) a substantial risk of death; (B) extreme physical pain; (C) protracted and obvious disfigurement; or (D) protracted loss or impairment of the function of a bodily member, organ, or mental faculty? If checked, **Major Injury** must also be checked.

For students of this school only

VICTIM OF A VIOLENT CRIMINAL OFFENSE?* Yes No If 'No,' Stop here.

Transfer Option Available? Yes No If 'No,' Stop here.

Outcome:

- Transfer Option Accepted, Transfer completed
- Transfer Option Accepted, Transfer not completed
- Transfer Option Declined

STUDENT FIRST NAME: _____ **STUDENT LAST NAME:** _____

STATE (NJSMART) STUDENT ID _____ **GENDER:** Male Female

ETHNICITY: Hispanic: Yes No **RACE:** (check all that apply) American Indian or Alaskan Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White

GRADE: K 1 2 3 4 5 6 7 8 9 10 11 12

SPECIAL EDUCATION ELIGIBILITY CRITERIA

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Autism | <input type="checkbox"/> Hearing impairments | <input type="checkbox"/> Other health impairments | <input type="checkbox"/> Speech language impairments |
| <input type="checkbox"/> Deaf-blindness | <input type="checkbox"/> Multiple disabilities | <input type="checkbox"/> Orthopedic Impairments | <input type="checkbox"/> Traumatic brain injury |
| <input type="checkbox"/> Emotional disturbance | <input type="checkbox"/> Mental retardation | <input type="checkbox"/> Specific learning disabilities | <input type="checkbox"/> Visual impairments |

LEP: Check if "Yes."

Section 504: Check if "Yes."

*See Appendix C of the EVVRS User Manual, <http://homeroom.state.nj.us/index.htm>.